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RECOMMENDATIONS FOR SCHOOL HEALTH SERVICE UNIT WITH SUGGESTED PLANS.

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THIS REPORT DISCUSSES RECOMMENDATIONS FOR THE PLANNING AND USE OF SPACE ALLOCATED FOR RENDERING NEEDED SCHOOL HEALTH SERVICES. ITEMS FOR CONSIDERATION ARE--(1) PURPOSES, (2) SITE, (3) LOCATION, (4) SPECIAL FEATURES, (5) SUPPLIES AND EQUIPMENT, AND (6) SUGGESTED PLANS OR LAYOUT OF THE UNIT. FUNCTIONAL AREAS WITHIN THE UNITS MAY INCLUDE--(1) REST AREA, (2) EXAMINING AND COUNSELING ROOM, (3) WAITING ROOM, (4) TOILET AND LAVATORY, AND (5) STORAGE AREA. DETAILED LISTS ARE GIVEN OF RECOMMENDED EQUIPMENT AND SUPPLIES. PLANS ARE INCLUDED FOR BOTH ELEMENTARY AND SECONDARY SCHOOL HEALTH SERVICE UNITS. (MM)

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RECOMMENDATIONS

FOR

SCHOOL HEALTH SERVICE UNIT

WITH

SUGGESTED PLANS

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
OFFICE OF EDUCATION

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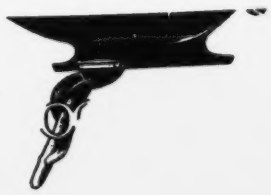

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by

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A STATEMENT OF RESPONSIBILITY

The board of trustees of a public school is legally responsible to "Provide suitable schoolhouses in their districts and make them comfortable." (Section 21-230, Code of Laws of South Carolina, 1952)

The State Superintendent of Education has the over-all responsibility of supervising the schools and "diffusing as widely as possible ... a knowledge of existing defects and desirable improvements in the government and instruction of the schools." (Section 21-23, Code of Laws of South Carolina, 1952)

The State Board of Health has the responsibility of being "the sole advisor of the State in all questions involving the protection of the public health." (Section 32-2, Code of Laws of South Carolina, 1952)

A suitable schoolhouse must of necessity provide for the safety and health of its pupils. As defined by the World Health Organization, "Health is a state of complete physical, mental and social well being, not merely the absence of disease or infirmity."

In South Carolina, public school officials are responsible for the safety and health of a pupil from the time he enters a school bus until he leaves the bus on his return home. In addition to guarding the child's health during this interval, the school has the responsibility of assisting the child in attaining and maintaining optimum health by teaching healthful living as a part of the school curriculum. The proper discharge of these duties requires that school buildings, in addition to being made safe and comfortable for classroom teaching and other necessary activities, be provided with a room especially designed and equipped for administration of health services rendered at school, including emergency care of sickness and accidents occurring at school.

Representatives of the State Department of Education and of the State Board of Health have studied together the health facility needs of schools in this State and health facilities used in other states. Out of this study, the committee has developed suggested plans for health service facilities which are recommended to school officials throughout the State for use in school buildings. This space has been designated as the School Health Service Unit. School officials are urged to give serious consideration to the recommendations included in this bulletin.

Jesse T. Anderson
State Superintendent of Education

G. S. T. Peeples, M. D.
State Health Officer

ACKNOWLEDGMENTS

Recommendations for School Health Service Unit with Suggested Plans was developed in 1953 by the South Carolina Joint Health and Education Committee of the State Department of Education and the State Board of Health. With a few changes to bring the recommendations up to date, this bulletin was revised and reprinted in 1961.

The Joint Health and Education Committee of 1961 acknowledges the work of committee members of 1953, who were responsible for development of the bulletin. The committee at that time included twelve people, some of whom are still members in 1961. Serving on the committee in 1953 as representatives of education were J. C. Holler, Maisie Bookhardt, J. S. Agnew, Minnie Lee Rowland, S. David Stoney, and W. B. Southerlin. Serving as representatives of health in 1953 were Dr. C. L. Guyton, Dr. Hilla Sheriff, Betty Ficquett, Charles A. Farish, Elizabeth Davis, and Dr. G. S. T. Peeples who was Director of Local Health Services and later succeeded Dr. Ben F. Wyman as State Health Officer. The committee recognizes the services of A. R. Vanston, Architect, U. S. Public Health Service, who was formerly Architect, Hospital Section, S. C. State Board of Health.

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1961

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THE SCHOOL HEALTH SERVICE UNIT

In all school buildings, space should be allocated for rendering needed school health services. This space may be designated as the School Health Service Unit. Items for consideration in planning and using the school health service unit are purposes, size, location, special features, supplies and equipment, and suggested plans or layout of the unit.

I. Purposes of the School Health Service Unit

The health service unit should be planned with very definite purposes in mind. These purposes vary in schools according to whether the school is large or small, urban or rural, elementary or high school. Suggested below are the primary purposes for which this unit should be used.

1. As an emergency center for the administration of first aid to school children and personnel, and for proper care of accident victims until they are moved from school.

2. As an emergency center for the care of children becoming ill during the school day, until they can be placed under their parent's care or returned to class.

3. As an emergency center where children with suspected communicable diseases can be cared for and separated from others until arrangements can be made for the parent or guardian to take over the case.

4. As a place for those who, because of health conditions, require on their physician's recommendation a rest period at school during the school day.

5. As a center where first aid and other supplies and equipment may be placed and kept in readiness at all times for use in emergency care and for use in rendering other health services to children at school.

6. As a work area for the nurse to inspect pupils referred to the nurse.

7. As a work area where periodic medical and dental inspections and other clinic services for school children can be given when it is necessary to render these services at school.

8. As a place where vision, hearing, and other screening procedures including the measurement of pupil height and weight may be carried out.

9. As a conference room where the nurse, doctor, teacher, pupil, parent, or others concerned with health counseling and guidance can discuss privately specific health problems of individual school children.

10. As a work center for school health personnel and as an area where children awaiting health services can be accommodated.

11. As a center where records and other information necessary in the administration of the emergency care program may be kept for ready use when needed. The records and information should include:

    (a) A copy of American Red Cross First Aid Textbook.

    (b) Copies of two charts developed for use in South Carolina - Control of Some Communicable Diseases, South Carolina State Board of Health, 1957, and Recommended Procedure for Emergency Care of Sickness and Accidents Occurring at School, Joint Health and Education Committee, 1957.

    (c) Records: (1) Accident and illness reports and (2) Complete card index file on each pupil giving name of parent or other persons to be notified, preferred physician and preferred hospital, this information being necessary to provide care in case of emergency at school.

II. Size of the School Health Service Unit

In planning the size of the health service unit, consideration should be given to space necessary for services that may be rendered and to the number of people who may be served. Consideration should be given to the prospect of increased enrollment.

III. Location of Health Service Unit

The health service unit should be centrally located on the ground floor, convenient to the main building exit, and near the administrative unit so that files and records connected with health services may be available to those concerned with health guidance and counseling. It is imperative that the unit be located in the quiet area near the administrative suite so that close supervision of the unit can be maintained. Placement of entrances and exits should be made with this point in view.

Accessibility to toilet and lavatory facilities, and arrangement for windows to provide natural light and ventilation are essential in the location of the health service unit.

IV. Special Features of the School Health Service Unit

All purposes for which the unit is designed may be carried out in one large unit which may be subdivided into rest area, examining and counseling room, waiting room, toilet and lavatory, and storage space.

In the larger schools and especially in the high schools, it is better to have the unit broken up into separate rooms as listed above. It is advisable, in some instances, to have the walls of these subdivisions of the large unit built so that they can be taken out or changed as the school grows or changes. This may be done by the use of non-bearing walls for partitions so that the size or shape of rooms may be altered as need arises. In smaller elementary schools, it is possible to have all services taken care of in one room, provided screens are placed between cots. In small schools, the waiting room of the administrative office suite may serve also as a waiting room for the health service unit.

The entire facility should be a cheerful and informal place--attractive but not pretentious. Walls should be of the same type as the classrooms. Flooring should be of a material which is non-absorbent and easily cleaned. Lavatories and sinks should be equipped with wrist controls. At least one door leading into rest areas should be sufficiently wide (preferably 42" or 44") to facilitate entrance and exit of equipment.

Adequate electrical wiring is essential in the unit. Special attention should be given to provision for wiring necessary for medical equipment. Convenience outlets should be provided near each bed.

Both natural and artificial lighting should be adequate, with approximately twenty foot candles of maintained light in examining room and with rest areas cheerful but less brilliantly lighted.

Special features of each section of the unit may include:

1. Rest Area

   In elementary schools, at least one bed set up at all times for immediate use.

   In the high school, at least two beds set up at all times.

   In high schools, complete separation in rest areas of girls and boys with more space provided for girls.

Additional beds in elementary and high schools. Additional beds might be folding type that can be put away when not in use, allowing space for other health services when clinics are held.

A minimum of three feet of space recommended between beds.

Storage space in rest area for roll-away beds and for linens and blankets to be used in the area.

Paper roll (preferably mounted on wall) for covering beds - rolls 18X3 P & A Examining Table Paper.

Hooks, strips, or other facilities for hanging wraps and clothing.

Shelves for books and other articles.

2. Examining and Counseling Room

Wall cabinet storage space with lock section for medical supplies.

Sink with wrist control and counter with counter cabinet storage space.

Lavatory with wrist control for handwashing.

Adequate electrical convenience outlets for instrument sterilizers and other appliances and equipment.

Doors into each rest area and into waiting room.

Filing cabinet for records.

Nurse's or first aider's desk and chair.

Telephone (desirable).

Examining table.

Sterilizer (portable instrument type).

Scales (not a spring model).

Bulletin board for notices and items such as Recommended Procedure for Emergency Care of Sickness and Accidents Occurring at School, and the chart on Control of Some Communicable Diseases.

3. Waiting Room

Comfortable, cheerful area with chairs for those waiting for services.

4. Toilet and Lavatory

In each rest area in larger units.

One toilet for entire unit in smaller units.

5. Storage Space

Adequate to hold supplies and equipment listed in these specifications.

V. Supplies and Equipment for Health Service Unit

(This list is taken from Recommended Procedure for Emergency Care of Sickness and Accidents Occurring at School, Joint Health and Education Committee, 1957. Additional items have already been listed in Special Features of the School Health Service Unit.)

Antiseptic (Use an antiseptic recommended by your local medical society or by your local health department.)

Aromatic spirits of ammonia (Inhalant for fainting)

Baking soda (For insect bites and stings)

Calamine lotion (For insect bites; also for inflammation due to poison oak, poison ivy, poison sumac)

Cold cream (For insect bites and stings)

Mineral oil (For insects in ear)

Oil of cloves (For aching or carious teeth)

Petroleum jelly in tubes (For first degree and small area second degree burns)

Rubbing Alcohol (70%) (For use in cleansing skin immediately after exposure to poison oak, poison ivy, poison sumac)

Snake-bite kit (Use directions included in kit)

Soap (Castile or any mild soap)

Table salt (Used in water to irrigate mouth for swelling or soreness caused by defective teeth)

Yellow oxide of mercury (1%) ointment in tubes (For chemical burns of the eye)

Red Cross First Aid Textbook (For information on pressure points to control bleeding, for use of a tourniquet, and for artificial respiration)

Note: The giving of aspirin or other drugs internally by school authorities is not advocated except on order of a physician.

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Adhesive tape

Arm and leg splints or splint materials

Cotton-tipped applicators in container

Flashlight

Hot water bottle

Ice bag

Oral clinical thermometer (Wash with soap and warm, not hot, water before and after each use)

Package of sterile absorbent cotton

Paper bags

Paper cups

Paper towels

Plain bandaids

Roller gauze bandage (One-inch, two-inch, and three-inch)

Safety pins

Sterile gauze squares (Individually wrapped 3"x3")

Teaspoon or medicine glass

Tongue depressors

Toothpicks

Triangular bandages

Tweezers

Oral clinical thermometer

- - - - - -

Pillows and pillow cases

Quart-size water pitcher

Sheets

Small pan

Two blankets per cot

Wash basin

Waste basket

- - - - - -

VI. Suggested Plans

The layouts on the following pages are offered as suggestions showing some of the elements that should be included in a school health service unit. All layouts should include sufficient details to provide for efficient health services in the unit.

These plans include:

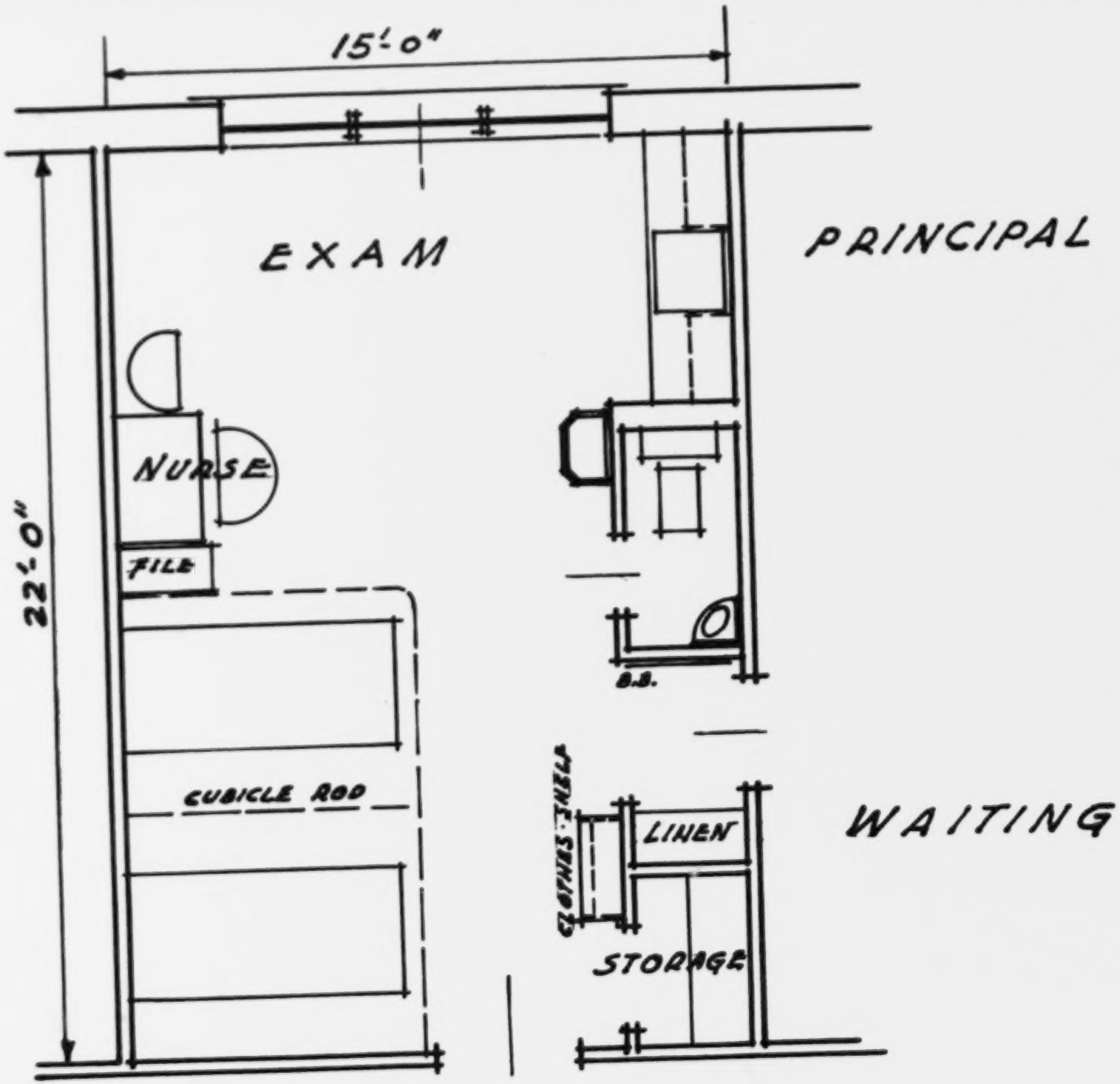
Plan A - Health Service Unit for Elementary Schools with 1 to 7 Classrooms

Plan B - Health Service Unit for Elementary Schools with 7 to 14 Classrooms

Plan C - Health Service Unit for Elementary Schools with 14 Classrooms and Over

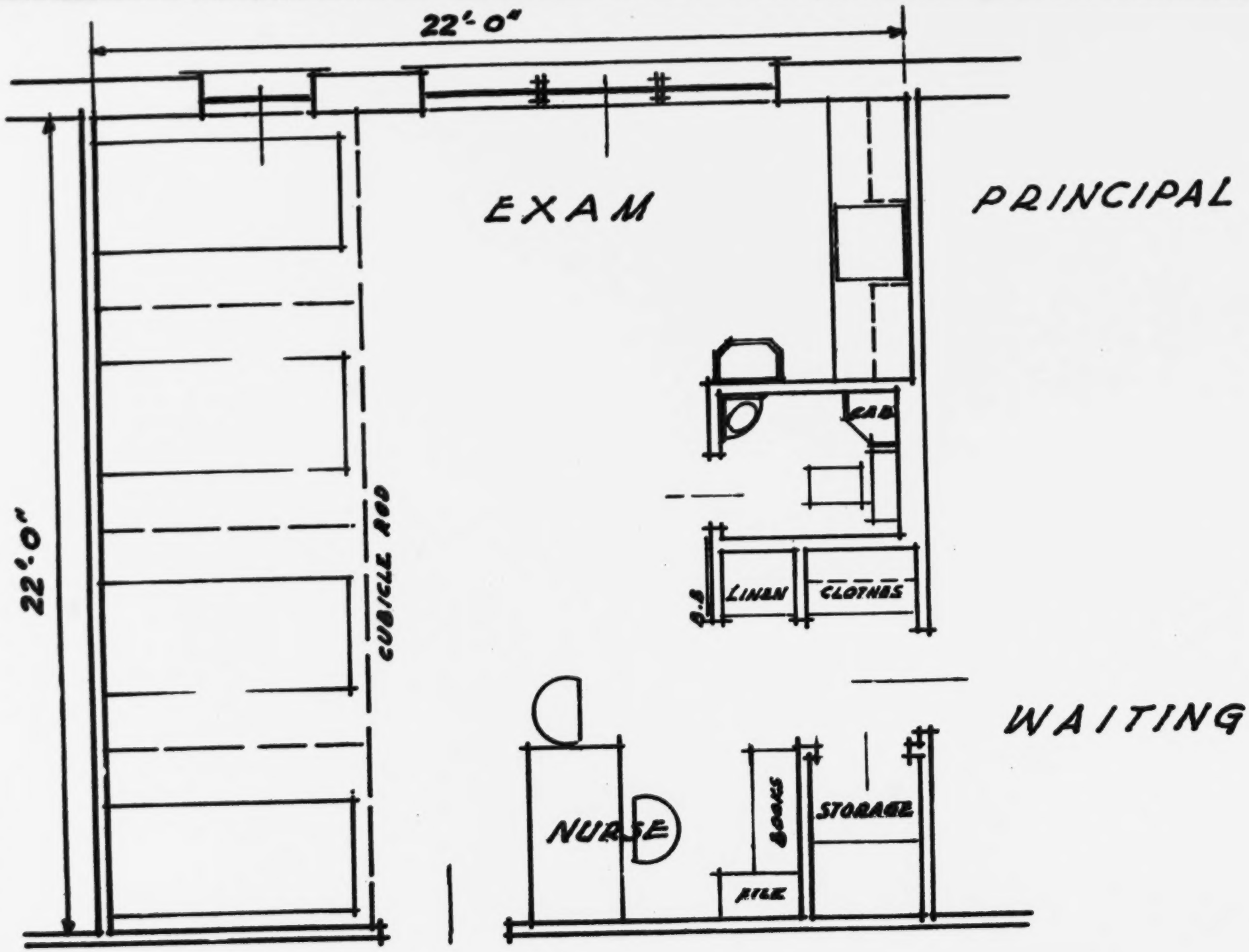
Plan D - Health Service Unit for High Schools

Plan E - Health Service Unit for High Schools



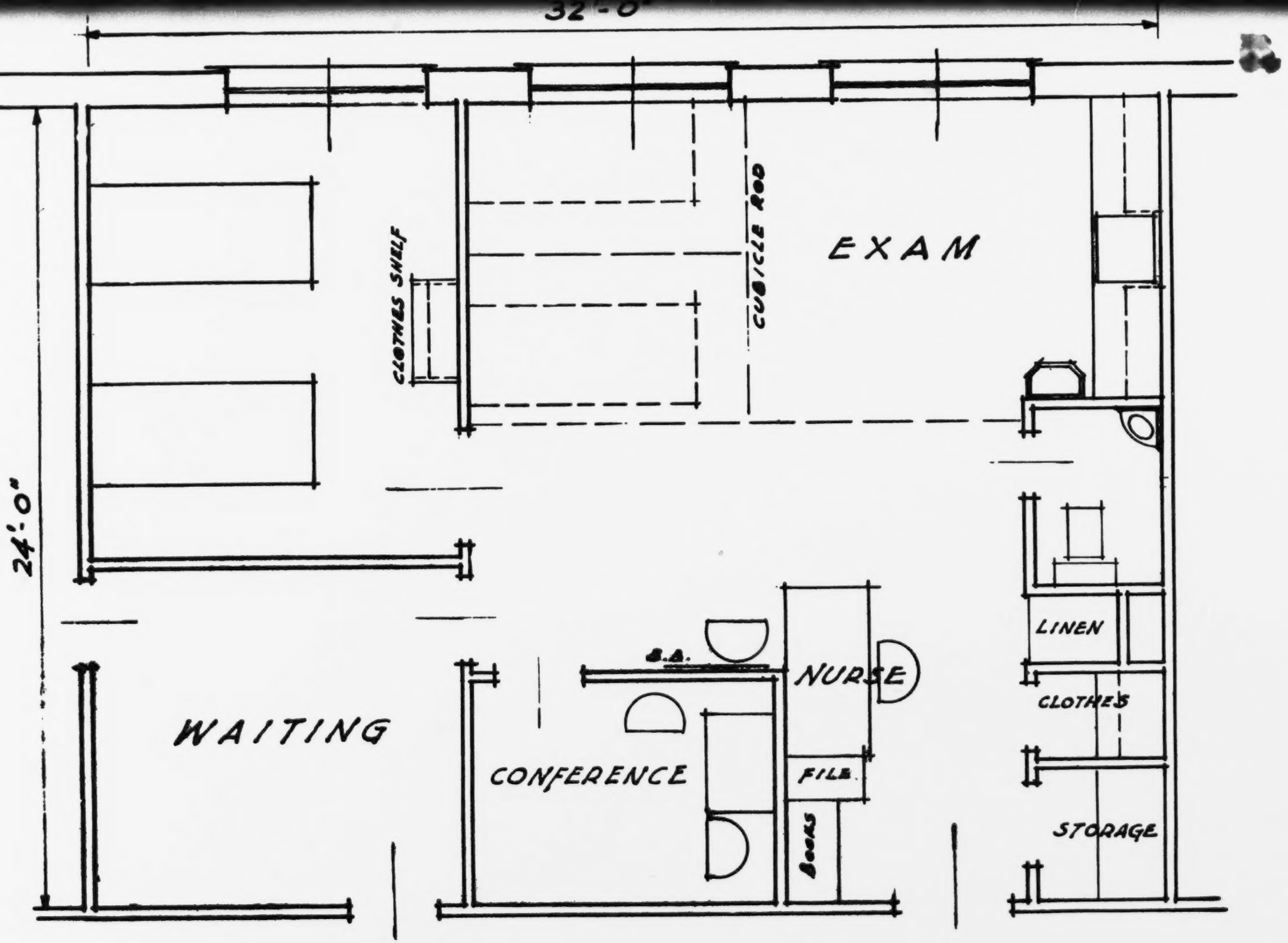
·HEALTH·UNIT·FOR·ELEMENTARY·SCHOOL·
·1 TO 7·CLASS·ROOMS·
·SCALE·1/4"-1'-0"

·PLAN·"A"·



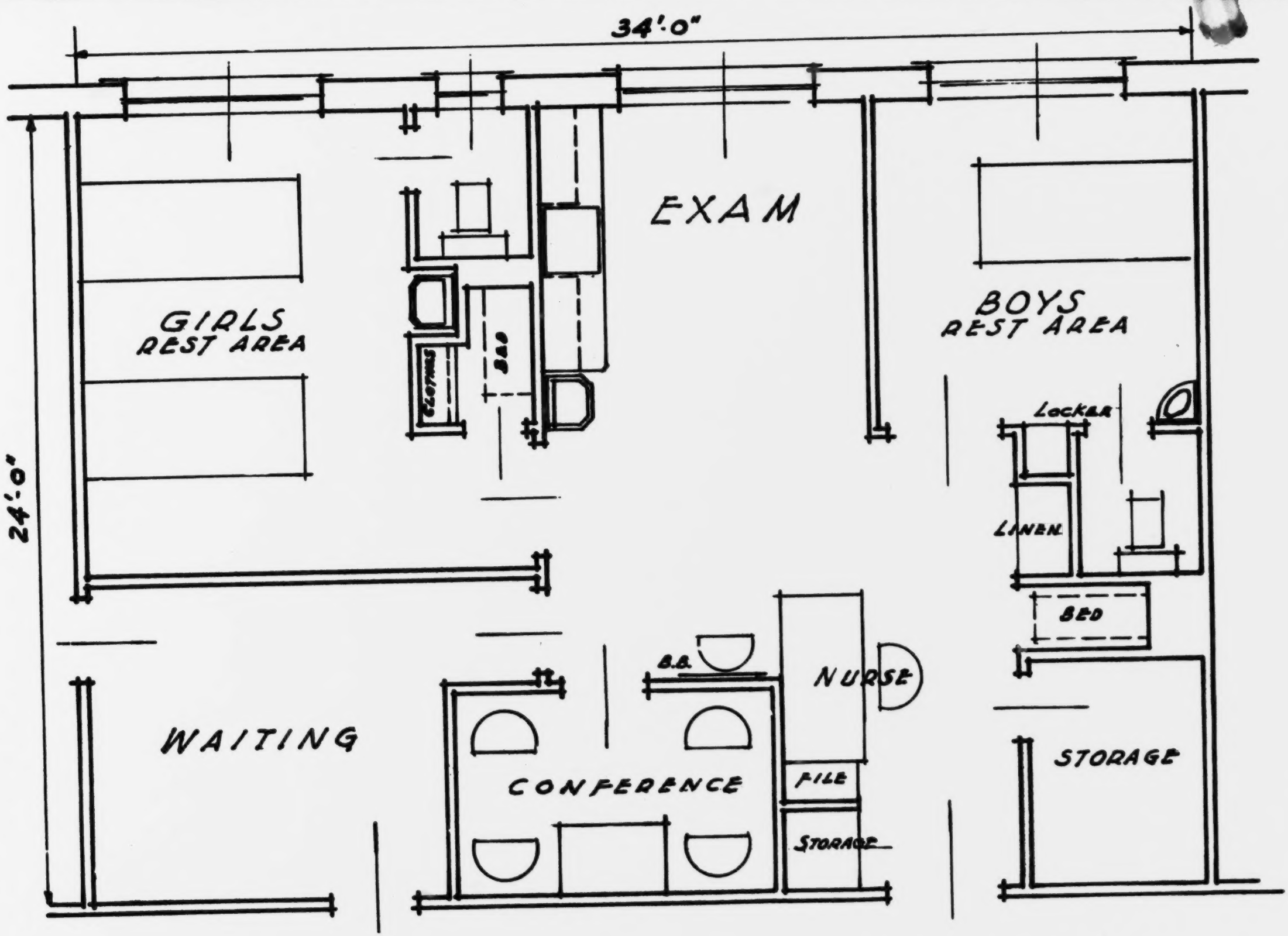
HEALTH · UNIT · FOR · ELEMENTARY · SCHOOL ·
· 7 · TO · 14 · CLASS · ROOMS ·
· SCALE · · 1/4" = 1'-0" ·

· PLAN · "B" ·



·HEALTH·UNIT·FOR·ELEMENTARY·SCHOOL·
·14·CLASS·ROOMS·AND·OVER·
·SCALE·1/4":1'-0"·

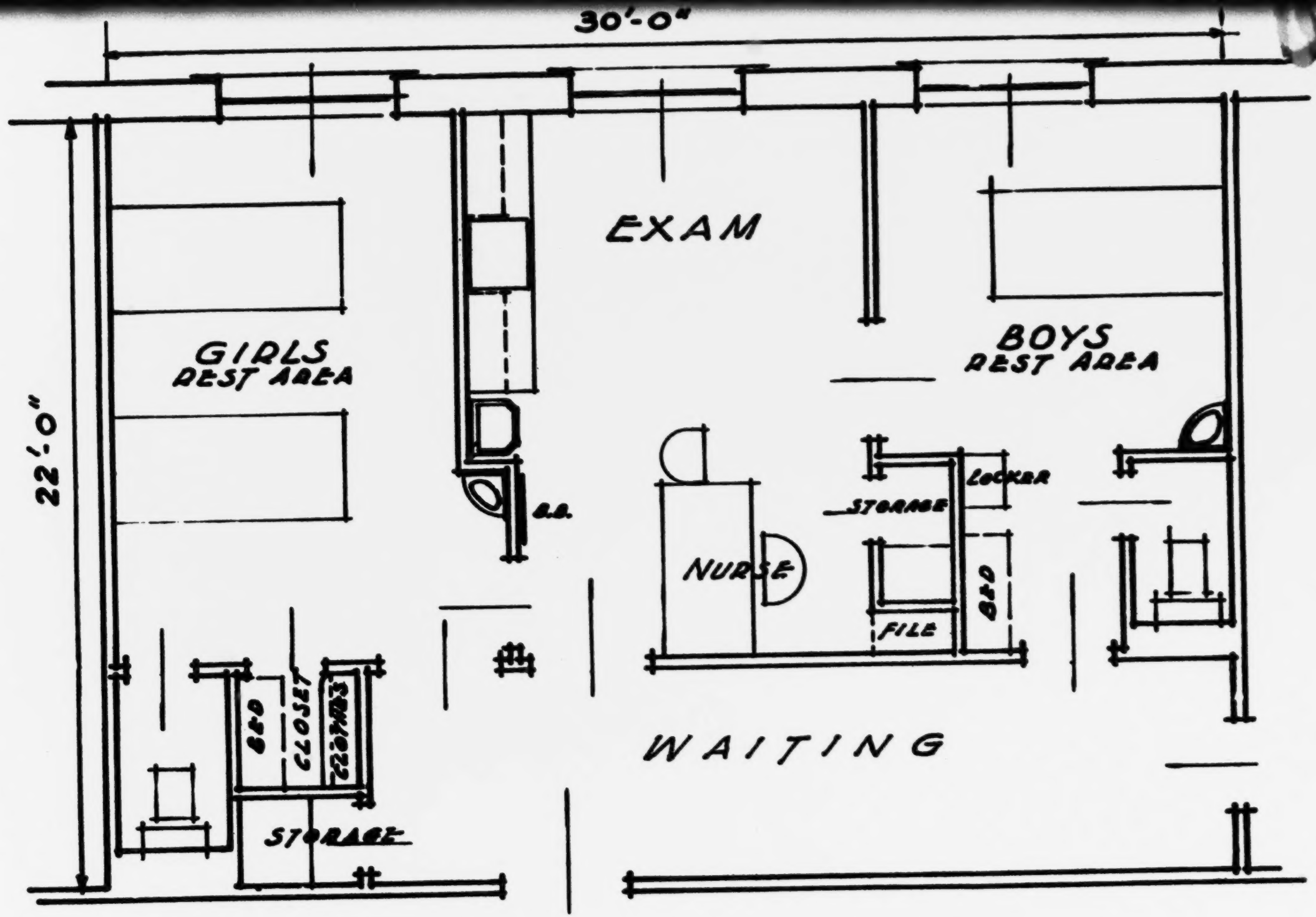
·PLAN·"C"·



· HEALTH · UNIT · FOR · HIGH · SCHOOL ·

· SCALE · · 1/4" = 1'-0" ·

PLAN "D"



·HEALTH·UNIT·FOR·HIGH·SCHOOL·

·SCALE· · ¼":1'-0"

·PLAN "E"·